

#2813

TRANSMITTAL FORM

| | |
|---------------------------|----------------------|
| Application Serial Number | 10/022,689 |
| Filing Date | December 17, 2001 |
| First Named Inventor | Fitzgerald |
| Group Art Unit | 2813 |
| Examiner Name | Laura M. Schillinger |
| Attorney Docket No. | ASC-023DVC2 |
| Patent No. | Not applicable |
| Issue Date | Not applicable |

ENCLOSURES (check all that apply)

| | | |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <input type="checkbox"/> Petition for Extension of Time <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below) |
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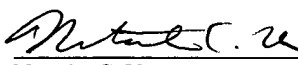
CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

SIGNATURE BLOCK

Respectfully submitted,

Date: August 21, 2003
Reg. No. 44,381
Tel. No.: (617) 310-8327
Fax No.: (617) 248-7100


Natasha C. Us
Attorney for the Applicant
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110



| <i>Complete if Known</i> | |
|---------------------------|----------------------|
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| First Named Inventor | Fitzgerald |
| Group Art Unit | 2813 |
| Examiner Name | Laura M. Schillinger |
| Attorney Docket No. | ASC-023DVC2 |

| METHOD OF PAYMENT | | | | FEE CALCULATION (continued) | | | |
|---|--|--|--|--|--|--|--|
| 1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | | | 3. ADDITIONAL FEES <div style="display: flex; justify-content: space-between;"> <div style="width: 15%;"> Large Entity Fee (\$) </div> <div style="width: 15%;"> Small Entity Fee (\$) </div> <div style="width: 50%;"> Fee Description </div> <div style="width: 15%;"> Fee Paid </div> </div> | | | |
| 2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. | | | | | | | |
| 3. <input type="checkbox"/> Applicant claims small entity status. | | | | | | | |
| FEE CALCULATION | | | | | | | |
| 1. FILING FEE | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 15%;"> Large Entity Fee (\$) </div> <div style="width: 50%;"> Fee Description </div> <div style="width: 15%;"> Fee Paid </div> </div> | | | | | | | |
| 750 Utility filing fee <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div> | | | | | | | |
| 330 Design filing fee <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div> | | | | | | | |
| 160 Provisional filing fee <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div> | | | | | | | |
| | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 15%;"> Number Filed </div> <div style="width: 15%;"> Number Extra </div> <div style="width: 15%;"> Rate </div> <div style="width: 15%;"> Amount </div> </div> | | | | | | | |
| Total Claims - 20 = x \$ 18.00 = | | | | | | | |
| Independent Claims - 3 = x \$ 84.00 = | | | | | | | |
| <input type="checkbox"/> Multiple Dependent Claim(s), if any \$280.00 = | | | | | | | |
| TOTAL: | | | | | | | |
| SMALL ENTITY DISCOUNT: | | | | | | | |
| SUBTOTAL (1) (\$) | | | | 0.00 | | | |
| 2. AMENDMENT CLAIM FEES | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 15%;"> Claims Remaining After Amend. </div> <div style="width: 15%;"> Highest No. Previously Paid For </div> <div style="width: 15%;"> Present Extra </div> <div style="width: 15%;"> Rate </div> <div style="width: 15%;"> Fee Paid </div> </div> | | | | | | | |
| Total - = x \$ 18.00 = | | | | | | | |
| Indep. - = x \$ 84.00 = | | | | | | | |
| <input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$280.00 = | | | | | | | |
| TOTAL: (\$) | | | | | | | |
| SMALL ENTITY DISCOUNT: (\$) | | | | | | | |
| SUBTOTAL (2) (\$) | | | | 0.00 | | | |
| | | | | | | | |
| TOTAL (\$) | | | | 180.00 | | | |
| CORRESPONDENCE ADDRESS | | | | SIGNATURE BLOCK | | | |
| Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100 | | | | Respectfully submitted, <div style="text-align: center;"> Natasha C. Us Attorney for the Applicant Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 </div> | | | |
| Date: August 21, 2003 Reg. No.: 44,381 Tel. No.: (617) 310-8327 Fax No.: (617) 248-7100 | | | | | | | |



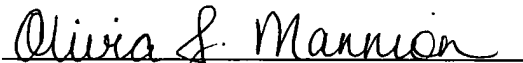
PATENT
Attorney Docket No. ASC-023DVC2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Fitzgerald
SERIAL NO.: 10/022,689 GROUP NO.: 2813
FILING DATE: December 17, 2001 EXAMINER: Laura M. Schillinger
TITLE: CONTROLLING THREADING DISLOCATION DENSITIES IN GE
ON SI USING GRADED GESI LAYERS AND PLANARIZATION

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 21st day of August, 2003.


Olivia J. Mannion

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are: Transmittal Form (1 page); Fee Transmittal (1 page); Supplemental Information Disclosure Statement (2 pages); Form PTO-1449 (1 page); References Labeled A117 to A120; Check in the Amount of \$180.00; and a return receipt postcard.

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PATENT
Attorney Docket No. ASC-023DVC2

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APPLICANTS: Fitzgerald
SERIAL NO.: 10/022,689 GROUP NO.: 2813
FILING DATE: December 17, 2001 EXAMINER: Laura M. Schillinger
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ON SI USING GRADED GESI LAYERS AND PLANARIZATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with the provisions of 37 C.F.R. 1.97 and 1.98, Applicants hereby make of record the patents and publications listed on the accompanying Form PTO-1449, and other information contained herein, for consideration by the Examiner in connection with the examination of the above-identified patent application. Copies of the patents and publications are enclosed.

REMARKS

In accordance with the provisions of 37 C.F.R. 1.97, this statement is being filed (CHECK ONE):

- ☐ (1) within three (3) months of the **filing date** of a national application other than a continued prosecution application under 37 C.F.R. 1.53(d), or within three (3) months of the **date of entry of the national stage** as set forth in 37 C.F.R. 1.491 in an international application, or before the mailing of the **first Office action** on the merits, or before the mailing of a **first Office action** after the filing of a request for continued examination under 37 C.F.R. 1.114; or
- ☒ (2) after the period defined in (1) but before the mailing date of a **final action** or a **notice of allowance** under 37 C.F.R. 1.311, and
- ☐ the requisite Statement is below, **OR**
- ☒ the requisite fee under 37 C.F.R. 1.17(p), namely **\$180.00**, is included herein, or

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- ☐ (3) after the mailing date of a **final action** or **notice of all wance** but before the payment of the **issue fee**, **AND**
- ☐ the requisite Statement is below, **AND**
- ☐ the requisite petition fee under 37 C.F.R. 1.17(p), namely **\$180.00** is included herein.


It is respectfully requested that each of the patents and publications listed on the attached Form PTO-1449, and other information contained herein, be made of record in this application.

Respectfully submitted,

Date: August 21, 2003
Reg. No. 44,381

Tel. No.: (617) 310-8327
Fax No.: (617) 248-7100

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High Street Tower
125 High Street
Boston, Massachusetts 02110



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|--|---|------------------------|-------------|---------------------------------------|------------------------|------------------|-----------------------------------|----------------------|---------------------------|
| FORM PTO - 1449 | | | | ATTY DOCKET NO.: ASC-023DVC2 | | | | | |
| SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT | | | | APPLICANT: Fitzgerald | | | | | |
| | | | | SERIAL NO.: 10/022,689 | | | | | |
| | | | | FILING DATE: December 17, 2001 | | | | | |
| | | | | GROUP: 2813 | | | | | |
| U.S. PATENT DOCUMENTS | | | | | | | | | |
| EXAM. INIT. | | DOCUMENT NUMBER | DATE | NAME | CLASS | SUB CLASS | FILING DATE IF APPROPRIATE | | |
| | A117 | 5,424,243 | 06/13/1995 | Takasaki | | | | | |
| | A118 | 2002/0052084 | 05/02/2002 | Fitzgerald | | | 05/16/2001 | | |
| | A119 | 2003/0077867 | 04/24/2003 | Fitzgerald | | | 07/16/2001 | | |
| | A120 | 6,602,613 | 08/05/2003 | Fitzgerald | | | 01/17/2001 | | |
| | | | | | | | | | |
| | | | | | | | | | |
| FOREIGN PATENT DOCUMENTS | | | | | | | | | |
| EXAM. INIT. | | DOCUMENT NUMBER | DATE | COUNTRY CODE | CLASS | SUB CLASS | FILING DATE | ABSTRACT ONLY | ENGLISH LANG (Y/N) |
| | | | | | | | | | |
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| | | | | | | | | | |
| OTHER ART, JOURNAL ARTICLES, ETC. | | | | | | | | | |
| EXAM. INIT. | OTHER DOCUMENTS: (Including Author, Title, Date, Relevant Pages, Place of Publication) | | | | | | | | |
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| EXAMINER | | | | | DATE CONSIDERED | | | | |

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